



**DEPARTMENT OF THE AIR FORCE**  
AIR FORCE RESERVE COMMAND

AUG 05 2005

**MEMORANDUM FOR AFRC MEDICAL UNITS**  
**AFRC SQUADRON MEDICAL ELEMENTS**

**FROM:** HQ AFRC/SG  
135 Page Road  
Robins AFB GA 31098-1601

**SUBJECT:** National Provider Identifier Implementation Guidance

References: (a) USAF/SGO Memo, 15 July 2005, Health Insurance Portability and Accountability Act (HIPAA) National Provider Identifier (NPI) Type 1 Enumeration and Implementation Plan

(b) ASD (HA) Memo 26 Jan 2005, Health Insurance Portability and Accountability Act National Provider Identifier Enumeration Policy for Military Health System for Individual (Type 1) Health Care Providers

1. The attached ASD (HA) and USAF/SGO policy memoranda outline DOD and USAF policy for compliance with use of the National Provider Identifier (NPI) mandated by HIPAA (public law 104-191). Although the AFRC medical program is not a covered entity under HIPAA, the collection of AF Reserve NPI is applicable to the utilization of Reserve providers in the MHS. Reserve providers that could provide the following services in the MHS will require an NPI: any health care provider that performs billable services; all privileged health care providers; and non-privileged providers, if their work involves "billable services". This includes squadron medical element providers assigned to line units. AF is not requiring that nurses or IDMTs obtain NPIs at this time. For Advanced Nurse Practitioners - RN state license information, along with their national certification, will work in the application. Currently the NPI application will not support physician assistants because it requires a license. AF policy directs the collection of NPI be tied with the privileging process with entry of data into CCQAS. Reserve providers will not have separate NPIs for civilian and Reserve employment. In most cases, the provider will require an NPI for their civilian practice.

2. All AFRC providers should provide their Entity Type-1 NPI to their unit credentials monitor as soon as available but not later than 23 April 2007 so that data entry can be accomplished NLT 23 May 2007. Any IMA providers who are not attached to an MTF will forward their NPI information to HQ ARPC/SG. Any providers without a civilian source NPI should apply for an NPI per the instructions attached. Whenever a provider changes or relocates their medical practice they should update their NPI information within the 30 day deadline and provide an updated copy to their credentials monitor at the next IDT/UTA. AFRC credentials monitors will enter NPI information in CCQAS (new section located in the demographics), file a hardcopy in the provider credential file in Section VI and forward a copy to the central TMA DMHRSi office

at [NPI@tma.osd.mil](mailto:NPI@tma.osd.mil) . Should you have questions or need additional information, my POC is Lt Col Alexander Alex, DSN 497-1897.

A handwritten signature in black ink, appearing to read 'G. P. Costanzo', with a stylized flourish at the end.

GEORGE P.COSTANZO, Col, USAF, MC, SFS  
Command Surgeon

2 Attachments:

1. USAF/SGO Policy Memo with attachments
2. NPI Application/Update Form

cc: AFRC/DO  
NAF/SGs  
ARPC/SG



DEPARTMENT OF THE AIR FORCE  
HEADQUARTERS UNITED STATES AIR FORCE  
WASHINGTON DC

JUL 15 2005

MEMORANDUM FOR ALMAJCOM/FOA/DRU

FROM: HQ USAF/SGO  
110 Luke Ave, Room 400  
Bolling AFB DC 20032-7050

SUBJECT: Health Insurance Portability and Accountability Act (HIPAA) National Provider Identifier (NPI) Type 1 Enumeration Policy and Implementation Plan

This policy memorandum establishes the plan for enumeration of individual healthcare providers with the Air Force Medical Service as required by the Health Insurance Portability and Accountability Act (HIPAA) (Public Law 104-191) National Provider Identifier (NPI) final rule (45 Code of Federal Regulations, Part 162). The NPI final rule establishes the NPI as the national standard and unique provider identifier. It is to be used throughout the United States healthcare system to identify health care providers in HIPAA covered standard transactions. The purpose of the NPI is to improve the efficiency of electronic transmission of health information.

Health care providers who conduct HIPAA standard electronic transactions are classified as "covered providers". The final rule identifies two categories of providers. NPI Entity Type 1 is for individual providers such as physicians, nurses, and dentists. Attachment 1 is the Centers for Medicare and Medicaid Services (CMS) NPI announcement to providers. CMS began accepting provider applications May 23, 2005 and DOD requires that all privileged providers obtain their Type 1 NPI by May 23, 2007 (Attachment 2).

To ensure compliance with DOD policy, the AF implementation guidance, "Instructions for Obtaining and Maintaining National Provider Identifiers (NPI) for Military Health System (MHS) Individual", is attached (Attachment 3). My point of contact is Ms. Sue Brockman, AFMSA/SGOC, phone: (202) 767-4143, or by email: [susan.brockman@pentagon.af.mil](mailto:susan.brockman@pentagon.af.mil).

MELISSA A. RANK

Brigadier General, USAF, NC, SFN  
Acting Assistant Surgeon General, Health Care Operations  
Office of the Surgeon General

Attachments:

1. CMS Announcement
2. TMA NPI Policy
3. AF NPI Guidance

attch 1 (1 of 11)



DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services

MAY 6 2005

*Administrator*  
Washington, D.C. 20201

National Provider Identifier Activities Begin in 2005

Dear Health Care Provider:

The Centers for Medicare & Medicaid Services (CMS) is pleased to announce the availability of a new identifier for use in the standard electronic health care transactions. The National Provider Identifier (NPI) will be the single provider identifier, replacing the different provider identifiers you currently use for each health plan with which you do business. This identifier, which implements a requirement of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), must be used by most HIPAA covered entities, which are health plans, health care clearinghouses, and health care providers that conduct electronic transactions for which the Secretary has adopted a standard (i.e., standard transactions). This letter will help you to understand the background of this requirement and what steps you need to take to apply for and receive an NPI.

The NPI is one of the steps that CMS is taking to improve electronic transactions for health care. National standards for electronic health care transactions encourage electronic commerce in the health care industry and simplify the processes involved to reduce the administrative burdens on health care providers. With national standards and identifiers in place for electronic claims and other transactions, health care providers will be able to submit transactions to any health plan in the United States. Health plans will be able to send standard transactions such as remittance advices and referral authorizations to health care providers. These national standards will make electronic data interchange a viable and preferable alternative to paper processing for health care providers and health plans alike.

To date, we have adopted and implemented the following HIPAA standards: electronic health care transactions and code sets, privacy, security, and the national employer identifier.

We are now beginning to implement the NPI. On January 23, 2004, the Secretary published a Final Rule that adopted the NPI as this identifier. As of the compliance dates listed below, HIPAA covered entities must use NPIs to identify health care providers in standard transactions. These transactions include claims, eligibility inquiries and responses, claim status inquiries and responses, referrals, and remittance advices.

*Attk 1 (280)*

## Page 2 – Health Care Provider

Health care providers include individuals, such as physicians, dentists, and pharmacists, and organizations, such as hospitals, nursing homes, pharmacies, and group practices. Health care providers who transmit health information electronically in connection with any of the standard transactions are required by the NPI Final Rule to obtain NPIs, even if they use business associates, such as billing agencies, to prepare the transactions.

The NPI will replace health care provider identifiers that are in use today in standard transactions. Implementation of the NPI will eliminate the need for health care providers to use different identification numbers to identify themselves when conducting standard transactions with multiple health plans. Many health plans, including Medicare, Medicaid, and private health insurance issuers, and all health care clearinghouses must accept and use NPIs in standard transactions by May 23, 2007. Small health plans have until May 23, 2008. After those compliance dates, health care providers may use only their NPIs to identify themselves in standard transactions, where the NPI is called for.

You will be able to apply for your NPI in one of three ways:

- You may apply through an easy web-based application process, beginning May 23, 2005. The web address is <https://nppes.cms.hhs.gov>.
- You may prepare a paper application and send it to the entity that will be assigning the NPI (the Enumerator) on behalf of the Secretary, beginning July 1, 2005. A copy of the application, including the Enumerator's mailing address, will be available on <https://nppes.cms.hhs.gov>. You may also call the Enumerator for a copy. The phone number is 1-800-465-3203 or TTY 1-800-692-2326.
- With your permission, an organization may submit your application in an electronic file. This could mean that a professional association or perhaps a health care provider who is your employer could submit an electronic file containing your information and the information of other health care providers. This process will be available in the fall 2005.

Remember, you may apply for an NPI using only one of the ways described above. When gathering information for your application, be sure that all of your information, such as your social security number and Federal employer identification number, are correct. Once you receive your NPI, safeguard its use. The application form contains a Privacy Act Statement, which explains how we may disseminate the information collected in the application.

Attach 1 (3 of 1)

You may receive notices about the NPI from many of the health plans with which you do business. Remember that you need apply only once for an NPI. The same NPI is used for every health plan.

The transition from existing health care provider identifiers to NPIs in standard transactions will occur over the next couple of years. We urge health care providers to apply for an NPI beginning on May 23, 2005. While the NPI must be used on standard transactions with health plans, other than small health plans, no later than May 23, 2007, health care providers should not begin using the NPI in standard transactions on or before the compliance dates until health plans have issued specific instructions on accepting the NPI. Health plans will notify you when you can begin using NPIs in standard transactions. You should be aware that health plans might request that you begin using your NPI prior to the compliance dates. Applying for an NPI does not replace any enrollment or credentialing processes with any health plan, including Medicare.

You may obtain information about the NPI at [www.cms.hhs.gov/hipaa/hipaa2](http://www.cms.hhs.gov/hipaa/hipaa2). This site contains Frequently Asked Questions and other information related to the NPI and other HIPAA standards.

Beginning May 23, 2005, we will also provide up-to-date information about the NPI, such as when and how to apply on the NPPES web site at <https://nppes.cms.hhs.gov>, or you may call the Enumerator at 1-800-465-3203 or TTY 1-800-692-2326.

Sincerely,

/s/

Mark B. McClellan, M.D., Ph.D.

Attch 1 (4 of 11)



HEALTH AFFAIRS

THE ASSISTANT SECRETARY OF DEFENSE

WASHINGTON, D. C. 20301-1200

JAN 26 2005

MEMORANDUM FOR ASSISTANT SECRETARY OF DEFENSE (RESERVE  
AFFAIRS)  
ASSISTANT SECRETARY OF THE ARMY (M&RA)  
ASSISTANT SECRETARY OF THE NAVY (M&RA)  
ASSISTANT SECRETARY OF THE AIR FORCE (M&RA)

SUBJECT: Health Insurance Portability and Accountability Act National Provider  
Identifier Enumeration Policy for Military Health System Individual  
(Type 1) Health Care Providers

This policy memorandum establishes the plan for enumerating individual health care providers within the Military Health System (MHS) as required by the Health Insurance Portability and Accountability Act (HIPAA) (Public Law 104-191) National Provider Identifier (NPI) final rule (45 Code of Federal Regulations, Part 162). In order to institutionalize this policy within the Department of Defense (DoD), a DoD Instruction will follow within the next 180 days. The HIPAA NPI final rule establishes the NPI as the standard, unique, provider identifier. The NPI is to be used throughout the entire United States health care system to identify health care providers in HIPAA covered standard electronic transactions. The purpose of the NPI is to improve the effectiveness and efficiency of the health care industry by enabling more efficient electronic transmission of certain health information.

Under provisions of the NPI final rule, individual health care providers who conduct HIPAA covered standard electronic transactions are considered "covered providers." They must obtain and use an NPI by May 23, 2007. While "covered providers" are required to obtain and use the NPI, all health care providers as defined by section 1861 (u) of the Act, or a provider of medical or other health services as defined in section 1861 (s) of the Act are eligible to be assigned NPIs and, therefore, may also obtain an NPI. Health care providers may apply for NPIs beginning approximately May 23, 2005.

The NPI final rule established two categories of health care providers for enumeration purposes. Entity Type 1 providers are individuals, such as physicians, nurses, dentists, and pharmacists. Entity Type 2 providers are organizational providers, such as hospitals, laboratories, pharmacies, clinics, and groups. This policy memorandum addresses the requirements related to Entity Type 1 (individual) providers.

HA POLICY: 05-002

Atch 1 (5 of 11)

A separate policy to address enumeration of Entity Type 2 (organizational) providers is under development.

The policy guidance outlining how the Services are to implement the NPI in the MHS is found at attachment 1. Detailed instructions for individual providers are contained in attachment 2.

My point of contact for this initiative is LCDR Stephanie Bardack at (703) 681-0064 or Stephanie.Bardack@tma.osd.mil.

  
William Winkenwerder, Jr., MD

**Attachments:**

As stated

**cc:**

Surgeon General of the Army  
Surgeon General of the Navy  
Surgeon General of the Air Force  
Director, Health and Safety, U.S. Coast Guard  
Reserve Component Surgeon General of the Army  
Chief, Naval Reserve  
Command Surgeon, Air Force Reserve  
Surgeon General of the Public Health Service

**HA POLICY: 05-002**

atch 1 (681)



## **Policy Guidance for Implementation of the National Provider Identifier**

The following paragraphs outline the responsibilities of DoD and the Service Surgeons General regarding compliance with the NPI final Rule. These responsibilities were developed through analysis of the NPI final rule and MHS business processes by the NPI Integrated Project Team which included representatives from the Services and TMA.

- For DoD purposes, all Health Care Providers who furnish billable health care services or those who may initiate and / or receive referrals must obtain an NPI-Type 1; however, there may be situations where non-citizen health care providers working in MTFs may not be able to obtain NPIs because they do not have a Social Security Number or IRS Individual Taxpayer Identification Number. There may also be situations where individuals who currently furnish and bill for atypical or nontraditional services (e.g., pastoral counselors) are not eligible for the NPI because the services they provide do not fall within the definition of "health care" as defined by section 1861 (u) of the Act, or a provider of medical or other health services as defined in section 1861 (s) of the Act. In these situations, there is no requirement under HIPAA to use the NPI or use standard transactions when submitting electronic claims. The Centers for Medicare and Medicaid Services (CMS) indicated that in these situations, organizations will be permitted to use identifiers other than the NPI when conducting electronic transactions.
- DoD is responsible for ensuring enumeration of Army, Navy and Air Force health care providers that need to be identified in HIPAA electronic transactions. This includes all privileged providers, residents, and certain non-privileged providers. Non-privileged providers are required to obtain an NPI-Type 1 only if they request referrals; request consults or provide billable services. For example, Independent Duty Corpsmen who request referrals, Independent Duty Medical Technicians working in the cast clinic or a nurse giving Depo-Provera injections when the patient has not seen the physician would need to be identified in certain HIPAA electronic transactions.
- DoD will collect the NPI-Type 1 as needed from Reserve, National Guard, Coast Guard & Public Health Service Privileged Providers, Department of Veterans Affairs Co-Located Providers, and civilian providers if working for the MHS or in MHS facilities.
- Beginning approximately May 23, 2005, the Services are to ensure that providers fitting the description outlined above begin applying for their NPI on their own. They may apply either by web application via the National Plan and Provider Enumeration System (NPPES) or paper form. The NPPES is the system developed by the CMS that will assign NPIs to providers. Paper forms should be made available at MTF credentialing offices.
- The Services are responsible for ensuring that all privileged /credentialed providers (including reservists) obtain and submit their NPI to the TRICARE

Management Activity (TMA) designated data base / repository prior to 23 May 2007.

- The Services are responsible for ensuring that those non-privileged providers requiring an NPI-Type 1 obtain and submit their NPI-Type 1 to the designated data base / repository prior to 23 May 2007.
- In addition to ensuring that existing MHS covered providers obtain and maintain an NPI, the Services are also responsible for ensuring that providers who are new to the MHS obtain and submit their NPI to the TMA designated database / repository.
- The Services are to ensure that when providers have a permanent change of practice location, or if other data that was originally submitted in order to obtain an NPI changes, providers update their NPI data in the National Plan and Provider Enumeration System within 30 days of the change. To ensure these updates are completed in the required timeframe, it is recommended that updates become part of the in-processing procedures when providers permanently change station.
- In order to ensure that NPI Enumeration of individual providers is occurring at an adequate rate, the Services will need to report statistics to TMA regarding how many providers are expected to obtain NPIs and monthly status reports as to how many providers actually submitted NPIs starting in August, 2005. It is expected that:
  - By September 30, 2005 - 10 percent of affected providers have submitted their NPI to the TMA designated data base / repository.
  - By September 30, 2006 - 50 percent of affected providers have submitted their NPI to the TMA designated data base / repository.
  - By 4 months prior to deadline of May 23, 2007 – 75 percent of affected providers have submitted their NPI to the TMA designated data base / repository.
  - By 3 months prior to deadline of May 23, 2007 – 85 percent of affected providers have submitted their NPI to the TMA designated data base / repository.
  - By 2 months prior to deadline of May 23, 2007 – 95 percent of affected providers have submitted their NPI to the TMA designated data base / repository.
  - By 1 month prior to deadline of May 23, 2007 – 100 percent of affected providers have submitted their NPI to the TMA designated data base / repository.

To assist providers and staff with the enumeration process, the Service Surgeons General should disseminate Memoranda of Instruction approximately 45 – 50 days prior to the date the NPPES is scheduled to become available to begin enumerating providers.

Representatives from TMA and the Services have developed an implementing instruction template to assist the Surgeons General with the task of educating providers. This instruction template contains "need to know" information for providers and can be used as a guide to be tailored by each Service. It remains the responsibility of each Service to: designate a Service POC who will be available to assist providers as needed, develop an appropriate plan to ensure compliance by affected providers, designate an entity within each MTF to collect and enter NPIs into the designated TMA data repository and to provide progress reports to TMA as to the status of enumeration. In addition to this NPI-Type 1 Enumeration Policy, the instructions to providers should include at a minimum, the information below:

- Website address set up by CMS for completing applications online (to be made available by CMS).
- Any pertinent Helpdesk numbers provided by CMS to assist applicants with the application process (to be made available by CMS).
- Where to obtain paper application forms if that is the preference of the provider.
- Any instructions for completing the NPI- Type 1 application form specific to MHS providers, including Service points of contact and their telephone numbers.
- Instruction on use of standardized addresses and any other data elements that may need instruction when filling out the NPI application.

Alak 1 (90)

**Air Force Instructions for Obtaining Entity Type I National Provider Identifiers (NPI)  
for Military Health System (MHS) Individual Health Care Providers**

1. TRICARE Management Activity (TMA) and representatives of the Services developed this instruction for individual military health care providers to follow when applying for National Provider Identifiers (NPI) Type 1.
2. For DoD purposes, all Health Care Providers who furnish billable health care services or those who may initiate and/or receive referrals must obtain an NPI Type 1. There are cases where providers that do not have a social security number or IRS Individual Taxpayer Identification number and do not currently furnish and bill for atypical or nontraditional services (e.g., pastoral counselors) are not eligible for NPI. In these situations there is no requirement under HIPAA to use the NPI or use standard transactions when conducting electronic transactions.
3. Beginning May 23, 2005, the following types of MHS health care providers need to apply for their NPI either by web application via the National Plan and Provider Enumeration System (NPPES) or paper form:
  - Any health care provider that provides billable services or HIPAA electronic transactions
  - All privileged health care providers
  - Residents
  - Non-privileged health care providers – if their work involves requesting referral, requesting consult or providing billable service
4. NPIs will be assigned at no fee by the Centers for Medicare and Medicaid Services (CMS) NPPES.
5. Providers may apply for and will receive only one NPI. This NPI will be a permanent identifier assigned for life, unless circumstances justify deactivation, such as a health care provider who finds that his/her NPI has been used fraudulently by another entity. Then, the provider can apply and will be eligible for a new NPI, and the previously assigned NPI will be deactivated. The NPI does not need to be renewed.
6. CMS has developed an on-line NPI application available at <https://nppes.cms.hhs.gov>. This application should be completed on-line by providers per the instructions available on the NPPES website. The information collected on the application is used to uniquely identify the health care provider.
7. CMS also has paper forms, which will be available at Military Treatment Facility (MTF) Credentials Management offices. A copy of the application can be downloaded, including the Enumerator's mailing address, will be available at <http://www.cms.hhs.gov/hipaa/hipaa2/regulations/identifiers/>. The form can also be downloaded in pdf format from the CMS forms page ([www.cms.hhs.gov/forms](http://www.cms.hhs.gov/forms))
8. Providers may also call the CMS Enumerator for a copy or for other provider inquiries at 1-800-465-3203 or TTY 1-800-692-2326.

9. Providers can contact their local MTF credentials office with their specific questions.
10. The Defense Medical Human Resource System - internet (DMHRSi) has been designated by TMA to be the NPI system of record. The process outlined below will incorporate the Credentials Manager (CM), as the AF subject matter expert on privileged providers, and use of CCQAS to ensure compliance with this mandate.
  - a. During the initial process of applying for privileges or during re-privileging, the CM will query the provider to see if they have received their NPI.
  - b. Providers with an NPI must bring a hardcopy of the NPI response to the CM. The CM will enter the NPI into the provider's record in CCQAS and a photocopy of the original will be filed in the provider's credential file (PCF).
  - c. For providers without an NPI, the CM will provide the NPPES website, <https://nppes.cms.hhs.gov>, to the provider to make the application. Upon receipt of their NPI, the provider will present the response to the CM. The CM will enter the NPI into the provider's record in CCQAS and a photocopy of the original response will be filed in the provider's credential file (PCF).
  - d. The CM will email the NPI response to the Central TMA DMHRSi office at [NPI@tma.osd.mil](mailto:NPI@tma.osd.mil). This office is responsible for entering the NPI into DMHRSi. If necessary, the CM can mail a photocopy of the NPI response to:  
Resources Information Technology Program Office (RITPO)  
ATTN: Amy Alarcon (Skyline 3, 900)  
5111 Leesburg Pike, Skyline 5, Suite 802  
Falls Church, VA 22041
11. When providers have a permanent change of station, or if other data originally submitted on the NPI application change, NPI data in the NPPES must be updated within 30 days of the change in order to remain HIPAA compliant. To ensure these updates are completed in the required timeframe, updates should become a part of the in-processing procedures checklist when providers permanently change station.
12. Reserve component providers need not update their NPI information in the NPPES when reporting to active duty, unless their primary civilian practice location has permanently changed.
13. In order to ensure standardized addresses are being used in the mailing address and the practice location fields on the NPI application, providers (other than Reserve component providers) are asked to use the Defense Medical Information System (DMIS) facility name as the address of record.
14. Additional information is available on the Clinical Quality Website under "HIPAA NPI" on the Knowledge Exchange at: <https://kx.afms.mil/clinicalquality/>
15. TMA POC is LCDR Stephanie Bardack, commercial phone number (703) 681-0064, email [Stephanie.bardack@tma.osd.mil](mailto:Stephanie.bardack@tma.osd.mil). AF POC is Susan Brockman, DSN 297-4143, commercial (202) 767-4143, email [susan.brockman@pentagon.af.mil](mailto:susan.brockman@pentagon.af.mil).

Attch 1 (11/05/05)

## NATIONAL PROVIDER IDENTIFIER (NPI) APPLICATION/UPDATE FORM

Please **PRINT** or **TYPE** all information so it is legible. Do not use pencil. Failure to provide complete and accurate information may cause your application to be returned and delay processing of your application. In addition, you may experience problems being recognized by insurers if the records in their systems do not match the information you have furnished on this form.

### SECTION 1 – BASIC INFORMATION

#### A. Reason For Submittal Of This Form (Check the appropriate box)

1. ☐ Initial Application  
2. ☐ Change of Information (See instructions)  
NPI No. \_\_\_\_\_
3. Deactivation NPI No. \_\_\_\_\_  
REASON (Check one of the following)  
☐ Death ☐ Business Dissolved  
☐ Other \_\_\_\_\_

#### B. Entity Type (Check the appropriate box)

1. ☐ An individual who renders health care. (Complete Sections 2A, 3, 4A and 5)  
2. ☐ An organization that renders health care. (Complete Sections 2B, 3, 4B and 5)

### SECTION 2 – IDENTIFYING INFORMATION

#### A. Individuals

1. Prefix (e.g., Major, Mrs.)	2. First	3. Middle	4. Last
5. Suffix (e.g., Jr., Sr.)		6. Credential (e.g., M.D., D.O.)	

Other Name Information (If applicable. Use additional sheets of paper if necessary)

7. Prefix (e.g., Major, Mrs.)	8. First	9. Middle	10. Last
11. Suffix (e.g., Jr., Sr.)		12. Credential (e.g., M.D., D.O.)	

#### 13. Type of other Name

- ☐ Former Name ☐ Professional Name ☐ Other (Describe) \_\_\_\_\_

14. Date of Birth (mm/dd/yyyy)	15. State of Birth (U.S. only)	16. Country of Birth (If other than U.S.)
--------------------------------	--------------------------------	---

#### 17. Gender

- ☐ Male ☐ Female

18. Social Security Number (SSN)	19. IRS Individual Taxpayer Identification Number
----------------------------------	---

#### B. Organizations and Groups

1. Name (Legal Business Name)	2. Employer Identification Number (EIN) or SSN
-------------------------------	--

3. Other Name (Use additional sheets of paper if necessary)

#### 4. Type of Other Name

- ☐ Former Legal Business Name ☐ D/B/A Name ☐ Other (Describe) \_\_\_\_\_

Atch 2 (10/6)

### SECTION 3 – ADDRESSES AND OTHER INFORMATION

#### A. Mailing Address Information

1. Mailing Address Line 1 (Street Number and Name or P.O. Box)

2. Mailing Address Line 2 (Address Information; e.g., Suite Number)

3. City

4. State

5. ZIP+4 or Foreign Postal Code

6. Country Name (if outside U.S.)

7. Telephone Number (Include Area Code & Extension)

8. Fax Number (Include Area Code)

#### B. Practice Location Information

1. Primary Practice Location Address Line 1 (Street Number and Name – P.O. Boxes Not Acceptable)

2. Primary Practice Location Address Line 2 (Address Information; e.g., Suite Number)

3. City

4. State

5. ZIP+4 or Foreign Postal Code

6. Country Name (if outside U.S.)

7. Telephone Number (Include Area Code & Extension)

8. Fax Number (Include Area Code)

#### C. Other Provider Identification Numbers *(Use additional sheets of paper if necessary)*

Number Type	Number	State <i>(if applicable)</i>	Issuer <i>(Other type)</i>
UPIN			
Medicare			
Medicaid			
Other			
Other			

#### D. Provider Taxonomy Code *(Provider Type/Specialty. Enter one or more codes)* and License Number Information

Information on provider taxonomy codes is available at [www.wpc-edi.com/taxonomy](http://www.wpc-edi.com/taxonomy). Please see instructions if you plan to submit more than one taxonomy code for a Type 2 (organization) entity.

1. Primary Provider Taxonomy Code or describe your specialty or provider type (e.g., chiropractor, pediatric hospital)

2. License Number

3. State where issued

4. Provider Taxonomy Code or describe your specialty or provider type (e.g., chiropractor, pediatric hospital)

5. License Number

6. State where issued

7. Provider Taxonomy Code or describe your specialty or provider type (e.g., chiropractor, pediatric hospital)

8. License Number

9. State where issued

Atch 2 (2 of 6)

**PENALTIES FOR FALSIFYING INFORMATION ON THE  
NATIONAL PROVIDER IDENTIFIER (NPI) APPLICATION/UPDATE FORM**

18 U.S.C. 1001 authorizes criminal penalties against an individual who in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies, conceals or covers up by any trick, scheme or device a material fact, or makes any false, fictitious or fraudulent statements or representations, or makes any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry. Individual offenders are subject to fines of up to \$250,000 and imprisonment for up to 5 years. Offenders that are organizations are subject to fines of up to \$500,000. 18 U.S.C. 3571(d) also authorizes fines of up to twice the gross gain derived by the offender if it is greater than the amount specifically authorized by the sentencing statute.

**SECTION 4 – CERTIFICATION STATEMENT**

I, the undersigned, certify to the following:

- This form is being completed by, or on behalf of, a health care provider as defined at 45 CFR 160.103.
- I have read the contents of the application and the information contained herein is true, correct and complete. If I become aware that any information in this application is not true, correct, or complete, I agree to notify the NPI Enumerator of this fact immediately.
- I authorize the NPI Enumerator to verify the information contained herein. I agree to notify the NPI Enumerator of any changes in this form within 30 days of the effective date of the change.
- I have read and understand the Penalties for Falsifying Information on the NPI Application/Update Form as printed in this application. I am aware that falsifying information will result in fines and/or imprisonment.

**A. Individual Practitioner's Signature**

1. Applicant's Signature (First, Middle, Last, Jr., Sr., M.D., D.O., etc.)	2. Date (mm/dd/yyyy)
--	----------------------

**B. Authorized Official's Information and Signature for the Organization**

1. Prefix (e.g., Major, Mrs.)	2. First	3. Middle	4. Last
5. Suffix (e.g., Jr., Sr.)		6. Credential (e.g., M.D., D.O.)	
7. Title/Position			8. Telephone Number (Area Code & Extension)
9. Authorized Official's Signature (First, Middle, Last, Jr., Sr., M.D., D.O., etc.)			10. Date (mm/dd/yyyy)

**SECTION 5 – CONTACT PERSON**

**A. Contact Person's Information**

☐ Check here if you are the same person identified in 2A or 4B.

If you checked the box, complete only item 8, e-mail address in this section (Section 5).

1. Prefix (e.g., Major, Mrs.)	2. First	3. Middle	4. Last
5. Suffix (e.g., Jr., Sr.)		6. Credential (e.g., M.D., D.O.)	
7. Title/Position		8. E-Mail Address	9. Telephone Number

**For the most efficient and fast receipt of your NPI, please use the web-based NPI process at the following address: <https://nppes.cms.hhs.gov>. NPI web is a quick and easy way for you to get your NPI.**

**Or send the completed application to: NPI Enumerator  
P.O. Box 6059  
Fargo, ND 58108-6059**

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0931. The time required to complete this information collection is estimated to average 20 minutes per response for new applications and 10 minutes for changes, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate or suggestions for improving this form, please write to: CMS, Attn: Reports Clearance Officer, 7500 Security Boulevard, Baltimore, Maryland 21244-1850. Do not send the applications to this address.

*Atch 2 (306)*



---

## PRIVACY ACT STATEMENT

---

Section 1173 of the Social Security Act authorizes the adoption of a standard unique health identifier for all health care providers who conduct electronically any standard transaction adopted under 45 CFR 162. The purpose of collecting this information is to assign a standard unique health identifier, the National Provider Identifier (NPI), to each health care provider for use on standard transactions. The NPI will simplify the administrative processing of certain health information. Further, it will improve the efficiency and effectiveness of standard transactions in the Medicare and Medicaid programs and other Federal health programs and private health programs. The information collected will be entered into a new system of records called the National Provider System (NPS), HHS/HCFA/OIS No. 09-70-0008. Institutional providers' data are protected by section 1106 of the Social Security Act and the Freedom of Information Act, while individually identifiable providers' data are protected by the Privacy Act of 1974.

Failure to provide complete and accurate information may cause the application to be returned and delay processing. In addition, you may experience problems being recognized by insurers if the records in their systems do not match the information you furnished on the form. (See the instructions for completing the NPI application/update form to find the information that is voluntary or mandatory.)

Information may be disclosed under specific circumstances to:

1. The entity that contracts with HHS to perform the enumeration functions, and its agents, and the NPS for the purpose of uniquely identifying and assigning NPIs to providers.
2. Entities implementing or maintaining systems and data files necessary for compliance with standards promulgated to comply with title XI, part C, of the Social Security Act.
3. A congressional office, from the record of an individual, in response to an inquiry from the congressional office made at the request of that individual.
4. Another Federal agency for use in processing research and statistical data directly related to the administration of its programs.
5. The Department of Justice, to a court or other tribunal, or to another party before such tribunal, when
  - (a) HHS, or any component thereof, or
  - (b) Any HHS employee in his or her official capacity; or
  - (c) Any HHS employee in his or her individual capacity, where the Department of Justice (or HHS, where it is authorized to do so) has agreed to represent the employee; or
  - (d) The United States or any agency thereof where HHS determines that the litigation is likely to affect HHS or any of its componentsis party to litigation or has an interest in such litigation, and HHS determines that the use of such records by the Department of Justice, the tribunal, or the other party is relevant and necessary to the litigation and would help in the effective representation of the governmental party or interest, provided, however, that in each case HHS determines that such disclosure is compatible with the purpose for which the records were collected.
6. An individual or organization for a research, demonstration, evaluation, or epidemiological project related to the prevention of disease or disability, the restoration or maintenance of health, or for the purposes of determining, evaluating and/or assessing cost, effectiveness, and/or the quality of health care services provided.
7. An Agency contractor for the purpose of collating, analyzing, aggregating or otherwise refining or processing records in this system, or for developing, modifying and/or manipulating automated data processing (ADP) software. Data would also be disclosed to contractors incidental to consultation, programming, operation, user assistance, or maintenance for ADP or telecommunications systems containing or supporting records in the system.
8. An agency of a State Government, or established by State law, for purposes of determining, evaluating and/or assessing cost, effectiveness, and/or quality of health care services provided in the State.
9. Another Federal or State agency
  - (a) As necessary to enable such agency to fulfill a requirement of a Federal statute or regulation, or a State statute or regulation that implements a program funded in whole or in part with Federal funds.
  - (b) For the purpose of identifying health care providers for debt collection under the provisions of the Debt Collection Information Act of 1996 and the Balanced Budget Act.

Atch 2 (4 of 5)

---

## INSTRUCTIONS FOR COMPLETING THE NATIONAL PROVIDER IDENTIFIER (NPI) APPLICATION/UPDATE FORM

---

Please PRINT or TYPE all information so it is legible. Do not use pencil. Failure to provide complete and accurate information may cause your application to be returned and delay processing of your application. In addition, you may experience problems being recognized by insurers if the records in their systems do not match the information you have furnished on this form.

This application is to be completed by, or on behalf of, a health care provider or a subpart seeking to obtain an NPI. (See 45 CFR 162.408 and 162.410 (a) (1).)

### SECTION 1 – BASIC INFORMATION

This section is to identify the reason for submittal of this form and the type of entity seeking to obtain an NPI.

#### A. Reason for Submittal of this Form

This section identifies the reason the health care provider is submitting this form. *(Required)*

##### 1. Initial Application

If applying for a NPI for the first time check box #1, and complete appropriate sections as indicated in Section 1B for your entity type.

##### 2. Change of Information

If changing information, check box #2, write your NPI number in the space provided, and provide the new/changed information within the appropriate section. See the instructions in Section 4, then sign and date the certification statement in Section 4A or 4B. All changes must be reported to the NPI enumerator within 30 days of the change. It is not necessary to complete sections that are not being changed; however, please ensure that your NPI number is legible and correct. Complete Section 5 so that we may contact you in the event of problems processing this form.

##### 3. Deactivation

Record the NPI number you want to deactivate and check box #3 indicating the reason. If you check Other, give reason; e.g., Fraudulent Use. Sign and date the certification statement in Section 4A or 4B, as appropriate. See instructions for section 4. Use additional sheets of paper if necessary.

#### B. Entity Type

Check the box that most applies to you or your organization. *(Required for initial applications)*

1. Individuals who render health care or furnish health care supplies to patients; e.g., physicians, dentists, nurses, chiropractors, pharmacists, physical therapists. Note that incorporated individuals may also obtain NPIs as type 2 organizations.
2. Organizations that render health care services, or furnish health care supplies to patients; e.g., hospitals, home health agencies, ambulance companies, health maintenance organizations, durable medical equipment suppliers, pharmacies.

### SECTION 2 – IDENTIFYING INFORMATION

#### A. Individual

**NOTE: An individual may obtain only one NPI, regardless of the number of taxonomies (specialties), licenses, or practice locations he/she may possess.**

##### Name Information

- 1-6. Provide your full legal name. *(Required first and last name)* Do not use initials or abbreviations. If you furnish your social security number in block 19, this name must match the name on file with the Social Security Administration (SSA). In addition, the date of birth must match that on file with SSA. You may include multiple credentials. Use additional sheets of paper for multiple credentials if necessary.

##### Other name information *(Use additional sheets of paper if necessary)*

- 7-12. If you have used another name, including a maiden name, supply that "Other Name" in this area. *(Optional)* You may include multiple credentials. Use additional sheets of paper for multiple credentials if necessary.
13. Mark the check box to indicate the type of "Other Name" you used. *(Required if 7-12 are completed)*
- 14-16. Provide the date *(Required)*, State *(Required)*, and country *(Required, if other than U.S.)* of your birth. Do not use abbreviations other than United States (U.S.).
17. Indicate your gender. *(Required)*
18. Furnish your Social Security Number (SSN) for purposes of unique identification. *(Optional)* If you furnish your SSN, this name must match the name and date of birth on file with the Social Security Administration (SSA). If you do not furnish your SSN, processing of your application may be delayed because of the difficulty of verifying your identity via other means; you may also have difficulty establishing your proper identity with insurers from which you receive payments. If you are not eligible for an SSN, see item #19.
19. Furnish your IRS Individual Taxpayer Identification Number (ITIN) if you do not qualify for an SSN. *(Required, if the applicant has an ITIN)* You may not use an ITIN if you have an SSN. IRS issues ITINs to foreign nationals and others who have federal tax reporting or filing requirements and do not qualify for SSNs. Examples of individuals who need ITINs include:
- Non-resident alien filing a U.S. tax return and not eligible for an SSN;
  - U.S. resident alien *(based on days present in the United States)* filing a U.S. tax return and not eligible for an SSN;
  - Dependent or spouse of a U.S. citizen/resident alien; and
  - Dependent or spouse of a non-resident alien visa holder.
- If you do not furnish your SSN or ITIN, you must furnish another proof of identity with this application form: a photocopy of your driver's license, State issued ID, employer ID, passport, or birth certificate.**

#### B. Organizations and Groups

- 1-2. Provide your organization's or group's name *(legal business name used to file tax returns with the IRS)* and Employer Identification Number *(assigned by the IRS)* or Social Security Number (SSN). *(Required)*
3. If your organization or group uses or previously used another name, supply that "Other Name" in this area. *(Optional)* Use additional sheets of paper if necessary.
4. Mark the check box to indicate the type of "Other Name" used by your organization. *(D/B/A Name=Doing Business As Name.)*  
*(Required if 3 is completed.)*

*Atch 2 (596)*

### SECTION 3 – ADDRESSES AND OTHER INFORMATION

#### A. Mailing Address Information

This information will assist us in contacting you with any questions we may have regarding your application for an NPI or with other information regarding NPI. You must provide an address and telephone number where we can contact you directly to resolve any issues that may arise during our review of your application. You may also add an e-mail address. *(Required)*

#### B. Practice Location Information

Provide information on the address of your primary practice location. If you have more than one practice location, select one as the “primary” location. Do not furnish information about additional locations on additional sheets of paper. *(Required)*

#### C. Other Provider Identification Numbers *(Optional)*

Please list the provider identification number(s) you currently use. This would include Medicare-issued numbers (UPIN, NSC, OSCAR, and PIN numbers), Medicaid-issued number *(show State)*, and numbers issued by other health plans *(give a brief description of issuer)*. If you do not have such numbers, you are not required to obtain them in order to be assigned an NPI.

#### D. Provider Taxonomy Code *(Provider Type/Specialty) (Required)*

Provide your 10-digit taxonomy code. Information on taxonomy codes is available at [www.wpc-edi.com/taxonomy](http://www.wpc-edi.com/taxonomy). You may provide a written description instead in the space provided, and we will assign the closest appropriate code.

Furnish the provider’s health care license or certificate number(s) (if applicable). If issued by a State, show the State that issued the license/certificate. The following individual practitioners are required to submit a license number *(If you are one of the following and do not have a license or certificate, you must enclose a letter to the Enumerator explaining why not)*:

Psychoanalyst	Clinical Psychologist	Chiropractor
Dentist	Optometrist	Licensed Nurse
Pharmacist	Nurse Practitioner	Physician Assistant
Clinical Nurse Specialist	Podiatrist	Certified Registered Nurse Anesthetist
Physician/Osteopath	Licensed Psychiatric Technician	Psychologist, Psychotherapy
Registered Nurse		

The following organizations are also required to submit a license number. Provide your license number(s) and State(s) where issued:

Home Health Agency	Hospital Unit	Hospital
Clinical Medical Laboratory	Managed Care Organization	Nursing Facility
Pharmacy	Federally Qualified Health Center	

You may use the same license or certificate number for multiple taxonomies; e.g., if you are a physician with several different specialties.

**NOTE:** A health care provider that is an organization, such as a hospital, may obtain an NPI for itself and for any subparts that it determines need to be assigned NPIs. In some cases, the subparts have Provider Taxonomy Codes that may be different from that of the hospital and of each other, and each subpart may require separate licensing by the State (e.g., General Acute Care Hospital and Psychiatric Unit). If the organization provider chooses to include these multiple Provider Taxonomy Codes in a request for a single NPI, and later determines that the subparts should have been assigned their own NPIs with their associated Provider Taxonomy Codes, the organization provider must delete from its NPS record any Provider Taxonomy Codes that belong to the subparts who will be obtaining their own NPIs. The organization provider must do this by initiating the Change of Information option on this form.

### SECTION 4 – CERTIFICATION STATEMENT *(Required)*

This section is intended for the applicant to attest that he/she is aware of the requirements that must be met and maintained in order to obtain and retain an NPI. This section also requires the signature and date of signature of the “Individual” who is the type 1 provider, or the “Authorized Official” of the type 2 organization who can legally bind the provider to the laws and regulations relating to the NPI. See below to determine who within the provider qualifies as an Authorized Official. Review these requirements carefully.

#### Authorized Official’s Information and Signature for the Organization

By his/her signature, the authorized official binds the provider/supplier to all of the requirements listed in the Certification Statement and acknowledges that the provider may be denied a National Provider Identifier if any requirements are not met. All signatures must be original. Stamps, faxed or photocopied signatures are unacceptable. You may include multiple credentials. Use additional sheets of paper for multiple credentials if necessary.

An authorized official is an appointed official with the legal authority to make changes and/or updates to the provider’s status (e.g., change of address, etc.) and to commit the provider to fully abide by the laws and regulations relating to the National Provider Identifier. The authorized official must be a general partner, chairman of the board, chief financial officer, chief executive officer, direct owner of 5 percent or more of the provider being enumerated, or must hold a position of similar status and authority within the provider.

Only the authorized official(s) has the authority to sign the application on behalf of the provider.

By signing this application for the National Provider Identifier, the authorized official agrees to immediately notify the NPI Enumerator if any information in the application is not true, correct, or complete. In addition, the authorized official, by his/her signature, agrees to notify the NPI Enumerator of any changes to the information contained in this form within 30 days of the effective date of the change.

### SECTION 5 – CONTACT PERSON *(If the contact person is the same person identified in 2A or 4B, complete only item 8, E-mail Address.) (Optional)*

To assist in the timely processing of the NPI application, provide the name and telephone number of an individual who can be reached to answer questions regarding the information furnished in this application. Please note that if a contact person is not provided, all questions about this application will be directed to the authorized official named in Section 4 or the provider named in Section 2, as appropriate. You may include multiple credentials. Use additional sheets of paper for multiple credentials if necessary.

Atch 2 (6 of 6)